# UNITED STATES IRONMENTAL PROTECTION AGENCY REGION V

111 West Jackson Blvd. CHICAGO, ILLINOIS 60604

REPLY TO ATTENTION OF: RCRA ACTIVITIES

MAY 24 1982

Arlene A. Hendrickson, Envr. Engr. Ashland Chemical Company P. O. Box 2219 Columbus, Ohio 43216

RE: Interim Status Acknowledgement

USEPA ID No. 0HD042311209

FACILITY NAME: Ashland Chemical Company

Dear Ms. Hendrickson:

This is to acknowledge that the U.S. Environmental Protection Agency (USEPA) has completed processing your Part A Hazardous Waste Permit Application. It is the opinion of this office that the information submitted is complete and that you, as an owner or operator of a hazardous waste management facility, have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. However, should USEPA obtain information which indicates that your application was incomplete or inaccurate, you may be requested to provide further documentation of your claim for Interim Status. Our opinion will be reevaluated on the basis of this information.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265, or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The printout enclosed with this letter identifies the limit(s) of the process design capacities your facility may use during the interim status period. This information was obtained from your Part A Permit application. If you wish to handle new wastes, to change processes, to increase the design capacity of existing processes, or to change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

As stated in the first paragraph of this letter, you have met the requirements of 40 CFR Part 122.23; your facility may operate under interim status until such time as a permit is issued or denied. This will be preceded by a request from this office or the State (if authorized) for Part B of your application. Please contact Arthur Kawatachi of my staff at (312) 886-7449, if you have any questions concerning this letter or the enclosure.

Sincerely yours,

Karl J. Klepitsch, Jr., Chief

Waste Management Branch

Enclosure

cc: Michel E. Mullier James D. Idol, Jr. Please refer to the Instructions for Filing Notification before completing this form. The Information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



# Notification of PA Regulated V le Activity United States Environmental Protection Agency

Date Received (For Official Use Only)

APR 1 6 1993

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	V. Installation Contact (Person to be contacted regarding waste activities at site)  Name (last)  (first)																												
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VIII. Type of Regulated waste Activity (	Mark 'X' in the appropriate	boxes. Refer to	o instructions.)	· ·
A. Hazardous 1	Waste Activity		B. Used Oil Fue	el Activities
1. Generator (See Instructions)  a. Greater than 1000kg/mo (2,200 lbs.)  b. 100 to 1000 kg/mo (220 - 2,200 lbs.)  c. Less than 100 kg/mo (220 lbs.)  2. Transporter (Indicate Mode in boxes 1-5  a. For own waste only  b. For commercial purposes  Mode of Transportation  1. Air  2. Rail  3. Highway  4. Water	4. Hazardous Waste a. Generator Marketa below) b. Other Marketa c. Burner - Indic Type of Comt	required for istructions.  Fuel riceting to Burner ers rate device(s) - pustion Device Boiler rial Boiler rial Furnace	a. Genera b. Other i c. Burner Type o 1. 2. 3.	ication Used Oil Fue Inter Marketing to Buil Marketer Indicate device(s) - Indicate device(s) - Indicate device Utility Boiler Industrial Boiler Industrial Furnace I
5. Other - specify			·	×
IX. Description of Regulated Wastes (U	se additional sheets if nec	essary)		
A. Characteristics of Nonlisted Hazardous wastes your installation handles. (See 40 Control of the Control of	<i>UFR Paris 261,20 - 261,24)</i> J. EP Toxic			onlisted hazardous  Toxic contaminant(s))
B. Listed Hazardous Wastes. (See 40 CFR 2	61,31 - 33. See instructions if	you need to list mo	ore than 12 waste code	251
1 2 F 0 0 1 F 0 0 Z 7 8	3 F003 F	10	11	12
C. Other Wastes. (State or other wastes requ	iring an I.D. number. See instr	uctions.)		
1 2	3	4	5	6
X. Certification	and the second second			
I certify under penalty of law that I have and all attached documents, and the obtaining the information, I believe to that there are significant penalties imprisonment.	eat based on my Inquing hat the submitted information for submitting false in	v of those Indiv mation is true, a nformation, inc	viduals immediate accurate, and cor cluding the poss	ely responsible for mplete. I am aware ibility of fines and
J. G. Nugu	Name and Official Title (by	le or print)	Date Sign	6/93
XI. Comments				
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Note: Mall completed form to the appropriat	e EPA Regional or State Offic	ce. (See Section I	Il of the booklet for a	ddresses.)

A



## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

OHDO42311209 REACKNOWLEDGEMENT
ABHLAND CHEMICAL COMPANY
RD BOX 2219
COLUMBUS
OH 43216
S200 BLAZER PARKWAY
DUBLIN OH 43017

INSTALLATION ADDRESS

EPA Form 8700-12B (4-80)

09/29/81

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NAME & OFFICIAL TITLE (type or print)

DATE SIGNED

Michel E. Mullier

Research Manager

8/8/80

EPA Form 8700-12 (6-80) REVERSE

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	VIII. FIRST OR	SUBSEQUENT	NOTIFICATION				narra <u>kan</u> kata <u>ra</u>	1775
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IX. DESCRIPTION OF HAZAR												
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D. LISTED INFECTIOUS WASTES hospitals, medical and research leading	S. Enter the four-digit nu	mber from 40 CFR	Part 261.34 for each lis	sted hazardous waste fi	rom hospitals, veterinary							
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X. CERTIFICATION		100	1									
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.												
SIGNATURE	<u>.</u>	NAME & OFFICIA	L TITLE (type or prin	t)	DATE SIGNED							
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PA

ChieFPA
State of Ohio Environmental Protection regency

P.O. Box 1049, 1800 WaterMark Dr. Columbus, Ohio 43266-0149 (614) 644-3020 FAX (614) 644-2329

George V. Voinovich
Governor
Donald R. Schregardus
Director

September 8, 1994

Man account of Ale

SEP 20 1994

Mr. William Olasin Compliance Manager Ashland Chemical Company P.O. Box 2219 Columbus, Ohio 43216

Dear Mr. Olasin:

REGARDING EPA ID NO .:

**₽ \_\_OH**D042311209

LOCATION OF INSTALLATION:

5200 Blazer Parkway, Dublin, Ohio 43017

In response to your request, the following information has been updated:

Facility Name - Ashland Chemical Company

If you have any questions, please contact Maria T. Velalis at 614/644-2939.

Sincerely,

Thomas E. Crepeau, Manager

Data Management Section

Division of Hazardous Waste Management

homas E. Crepeau

TEC/mtv

c: U.S. EPA, Region V



**Environmental, Health & Safety** 

**G. W. Hammer** Vice President (614) 889-3052 Ashland Chemical, Inc. Subsidiary of Ashland Oil, Inc. Address Reply: PO. Box 2219 Columbus, Ohio 43216

April 13, 1993

RECEIVED

Ohio EPA

Div. of Hazardous & Solid Waste Mgmt. Data Management Section 1800 WaterMark Drive Columbus, OH 43215 APR 16 1993

DIV. OF HAZARDOUS WASTE MGT

Attn: Mr. Tom Crepeau

Dear Mr. Crepeau:

Attached you will find a request for an EPA identification number for our Warren, Michigan facility. Please forward this information to:

Ashland Chemical, Inc. P.O. Box 2219 Columbus, Ohio 43216

Attn: Linda L. Lazich, EH&S, DA-4

I will forward this information on to our location. I understand you will be receiving new forms shortly. Please mail some of these to me as well. Thank you for your assistance in this matter. If you should have any questions please do not hesitate to contact me at 614/889-4048.

Sincerely,

Linda L. Lazich

Environmental, Health & Safety

Linda L. Layich

Ashland Chemical, Inc.

Enc.



P.O. Box 1049, 1800 WaterMark Dr. Columbus, Ohio 43266-0149 (614) 644-3020 FAX (614) 644-2329 George V. Voinovich
Governor
Donald R. Schregardus

RECORD CENTER

Director

March 3, 1993

Ashland Chemical, Inc. Attn: Jerry Boone 5200 Blazer Memorial Parkway Dublin, OH 43017

RE: EPA ID#: OHD042311209

LOCATION of INSTALLATION: 5200 Blazer Memorial Pkwy

Dublin, OH 43017

In response to your request of February 1993 the following information has been updated:

Name: Ashland Chemical Inc

Contact: Jerry Boone (614)889-3487

No longer listed as a transporter.

If you have any questions, please contact Beth Barrett at (614)644-2977.

Sincerely,

Thomas E. Crepeau, Manager

Data Management Section

Division of Hazardous Waste Management

Thomas E. Crepeau

TEC/bab

cc: U.S. EPA, Region V

Ohio EPA District Office



DIVISION OF ASHLAND OIL, INC.

P.O. BOX 2219 • COLUMBUS, OHIO 43216 • [614] 889-3333

ENGINEERING & ENVIRONMENTAL AFFAIRS W. L. Tordoff

W. L. Tordof Director

September 29, 1989

WASTERNANA CE OK RCRA EPA, RECION VISION

Mr. Tom Crepeau Division of Solid and Hazardous Waste Management Ohio EPA P.O. Box 1049 Columbus, OH 43266-0149

Re: Ashland Chemical, Inc.

Dublin, OH OHD042311209

Dear Mr. Crepeau:

Ashland Chemical Company, a Division of Ashland Oil, Inc., will become Ashland Chemical, Inc., a wholly owned subsidiary of Ashland Oil, Inc., on October 1, 1989. This corporate reorganization will not affect operations at the referenced facility.

A revised EPA Form 3510 is enclosed to reflect the change to Ashland Chemical, Inc. for the Interim Status permit. The revised form also indicates a new facility contact. Formaldehyde waste (Hazardous Waste No. U122) has also been added.

Should you have any questions or require additional information, please contact me at 614/889-4035.

Sincerely,

Andrew J. Kolarsky

Manager of Environmental Compliance

AJK:dli

cc: Lisa Pierard, U.S. EPA, Region V Chris Hartford, CDO, Ohio EPA

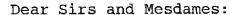


DIVISION OF ASHLAND OIL, INC.

RESEARCH AND DEVELOPMENT DIVISION • P. O. BOX 2219, COLUMBUS, OHIO 43216 • (614) 689-333

August 16, 1989

U.S. Environmental Protection Agency Region V, Hazardous Waste Branch 5HR-JCK-13 230 S. Dearborn St. Chicago, Ill 60604



Ashland Chemical's Research and Development facility located at 5200 Blazer Parkway, Dublin, Ohio 43017 is covered by EPA Generator Identification No. OHDO42311209. The purpose of this letter is to notify you that, as of October 1, 1989, Ashland Chemical, a Division of Ashland Oil, Inc. will become Ashland Chemical, Inc., a wholly owned subsidiary of Ashland Oil, Inc. This corporate restructuring will not affect daily operations at the Research and Development facility.

Please call if you have any questions.

Very truly yours,

Michel E. Mullier

Manager, Research Building Services

/rjh

cc: R. G. Patrick - Ashland Chemical - DA-2

K. M. Woods - Ashland Chemical - DA-5

T. J. Weeks - Ashland Chemical - DR-3

Paul Flanigan - Ohio EPA

U. C. STA, EDGGE V





DIVISION OF ASHLAND OIL, INC.

P. O. BOX 2219, COLUMBUS, OHIO 43216 • (614) 889-3333

ENGINEERING DEPARTMENT R. O. Spooner

R. O. Spooner Director of Engineering

January 29, 1986

a w la a a

FEB 0 3 1986

U.S. EPA, REGION V

U.S. EPA Region V Federal Building 230 South Dearborn Chicago, IL 60604

Dear Sir or Madam:

Enclosed is a revised Part A application for our Columbus Research and Development Laboratory. In response to regulatory changes regarding wastes used in a fuels program and the definition of the F001-F005 wastes, we have added the solvent storage tank storing D001 and F001, 2, 3, and 5, and drum storage of F003 and F005. The revised Part A has been sent to the facility owner in New York for signature and will be forwarded to you when received.

If you have any questions, call me on 614/889-3695.

Sincerely,

Arlene A. Hendrickson Environmental Engineer

Hendrickson

AAH:dli Enclosure

072



DIVISION OF ASHLAND DIL, INC.

P. O. BOX 2219, COLUMBUS, OHIO 43216 • (614) 889-3333

ENGINEERING DEPARTMENT R. O. Spooner Director of Engineering

August 31, 1982

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RECEIVED

Mr. Robert D. Fragale Technical Advisor c/o Hazardous Waste Facility Approval Board P.O. Box 1049 361 Broad Street Columbus, Ohio 43216

WASTE MANAGEMENT BRANCH EPA REGION V

SEP 13 1982

Dear Mr. Fragale:

Enclosed is a copy of Arlene Hendrickson's letter to you describing an error that was made in submitting the Part A RCRA application for the R&D Laboratory in Dublin, Ohio (EPA ID# OHDO42311209 and Ohio Permit No. 01-25-0118), a corrected copy of P 1 of 5 of the application, and a copy of the Part A RCRA application which was signed by me as requested by the US/EPA Region V.

If you have any questions, please call Arlene Hendrickson at 889-3695, who is the environmental engineer handling RCRA applications.

Very truly yours

J. D. Idol, Jr. Vice President

Research & Development

cc: Kathy Hulmer

Arthur Kawatachi US/EPA Region V RCRA Activities P.O. Box 3587A Chicago, Illinois 60690

M. E. Mullier J. W. Boone ROS/RCS E-6199 Note TRS, TSD, PA

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EPA Form 3510-1 (Rev. 10-80)

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IT PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, either the code (if it is process will be used that is not included in the list of codes below, then describes the process including in design expectify) in the space provided on the form (institute).  PROCESS DESIGN CAPACITY - For each code statement including in design expectify) in the space provided on the form (institute).  PROCESS DESIGN CAPACITY - For each code statement including the form institute and codes below, then describes the unit of codes below, then describes the unit of codes below that describes the unit of codes and codes below that describes the unit of codes and codes below that describes the unit of codes and codes are codes below that describes the unit of codes and codes are codes below that describes the unit of codes and codes are codes below that describes the unit of codes and codes are codes below that describes the unit of codes and codes are codes below that describes the unit of codes and codes are codes below that describes the unit of codes are codes below that describes the unit of codes are codes below that describes the unit of codes are codes and codes are codes are codes are codes and codes are codes are codes are codes are codes and codes are codes are codes are codes.  PROCESS CODE PROC	B. R.	EV.	SE	D A	APPLICATION				and c	omp.	le te	tem	Iab	ove	)		-			2. F	ACILIT	Y HAS A	RCR	A P	ERF	MIT		
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C. SPACE FOR ADDITIONAL PRO-			
INCLUDE DESIGN CAPACITY.			

## IV. DESCRIPTION OF HAZARDOUS WASTES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four—digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four—digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each fisted waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE	METRIC UNIT OF MEASURE CODE
POUNDS	KILOGRAMS
TONS	METRIC TONS

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the weste.

### D. PROCESSES

1. PROCESS CODES:

For fisted hazardous waste: For each fisted hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to Indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous westes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

MOTE: MAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous westes that can be described by prote than one EPA Hazardous Waste Number shell be described on the form as follows:

- 3. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- 2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the weste, in column D(2) on that line enter "included with above" and make no other entries on that line.
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous weets.

EXAMPLE FOR COMPLETING ITEM IV Ishown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds for year of chronic shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 300 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 300 pounds per year of each waste. The other waste is corrosive and ignitiable and there will be an estimated 300 pounds per year of that waste. Treatment will be in an incinerator and dispose will be in a lendfill.

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Continued from the front.	<u></u>	
IV. DESCRIPTION OF HAZARDOUS WASTES ILVE	stinued)	
E. USE THIS SPACE TO LIST ADDITIONAL PROC	ESS CODES FROM ITEM D(1) ON PAGE 3.	
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V. FACILITY DRAWING		1. 人名英格兰 医克斯克曼氏炎
All-existing facilities must include in the space provided on p	page 5 a scale drawing of the facility (see instructions for n	nore detail).
VI. PHOTOGRAPHS		
All existing facilities must include photographs (aeric	al or ground—level) that clearly delineate all existing	g structures; existing storage,
Treatment and disposal areas; and sites of future stor	age, treatment or disposal areas (see instructions fo	r more detail).
I. FACILITY GEOGRAPHIC LOCATION		
LATITUDE (degrees, minutes, & seconds;	LONGITUDE (de	rees, minutes, & seconds)
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VIII. FACILITY OWNER		and the state of t
A. If the facility owner is also the facility operator as in	isted in Section VIII on Form 1, "General Information", p	lace an "X" in the box to the left and
skip to Section IX below.		
2. B. If the facility owner is not the facility operator as if	sted in Section VIII on Form 1, complete the following it	erre:
1. NAME OF FACIL	ITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
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III. PROCESSES – CODES AND DESIGN CAPACITIES																							
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•	A. PROCESS CODE — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).																						
	describe the process (including its design capacity) in the space provided on the form (Item III-C).  B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.																						
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ESCRIBING OTHER PROCESSES (code "TO4"). EACH PROCESS ENTERED HERE

V. DESCRIPTION OF HAZARDOUS WASTES

EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you fiendle hazardous westes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

ESTIMATED ANNUAL QUANTITY - For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis, For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

UNIT OF MEASURE - For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	к
TONS	<b>. T</b>	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

### **PROCESSES**

## 1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code/s/ from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

DTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER -- Hazardous wastes that can be described by ore than one EPA Hazardous Waste Number shall be described on the form as follows:

- 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B.C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter 'included with above" and make no other entries on that line.
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

KAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds r year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes e corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 10 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

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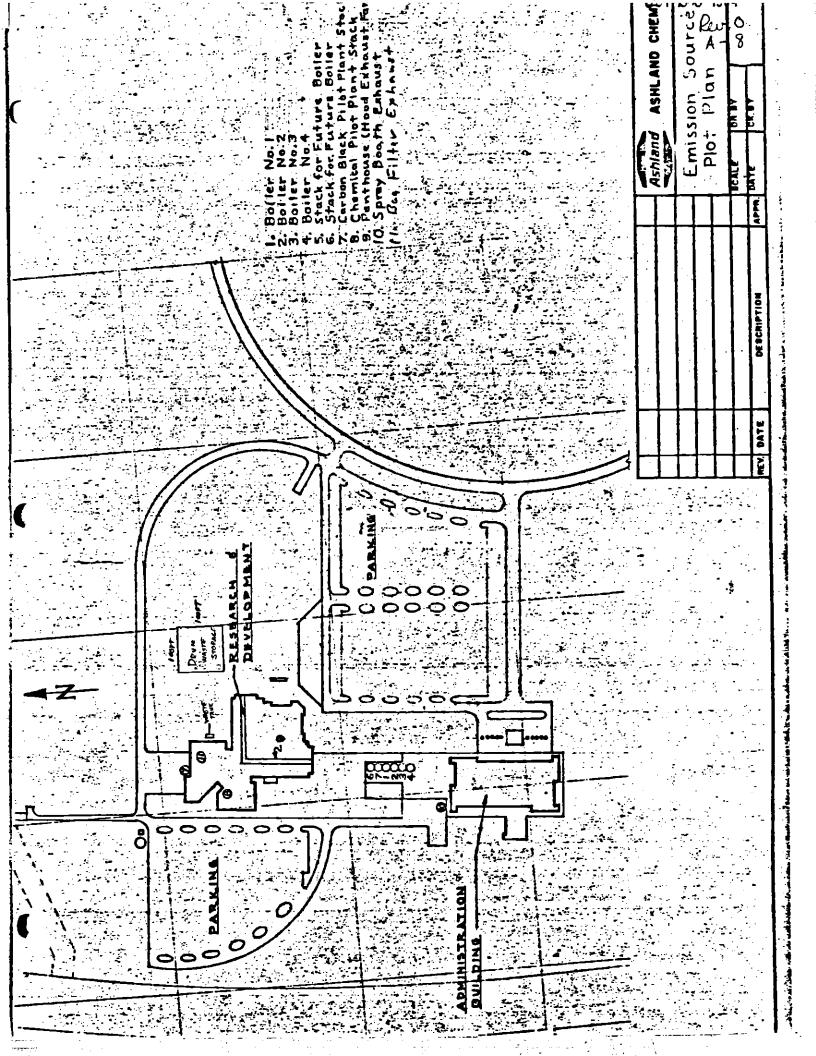
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CONTINUE ON PAGE 5







DIVISION OF ASHLAND DIL INC.

P. O. BOX 2219, COLUMBUS, OHIO 43216 • (614) 889-3333

ENGINEERING DEPARTMENT R. O. Spooner Director of Engineering

April 23, 1982

Mr. Robert D. Fragale
Technical Advisor
c/o Hazardous Waste Facility Approval Board
P. O. Box 1049
361 Broad Street
Columbus, Ohio 43216

Dear Mr. Fragale:

In reviewing the Hazardous Waste Facility Installation and Operation Permits for our plants, I found that the permit for our Dublin R&D Lab (Permit No. 01-25-0118) still has 55 gallons for the design capacity of the drum storage area. This indicates the size of the containers. I would like to change this to S01 44,000 G to reflect 44,000 gallons of waste stored in drums. At the time we were completing these forms for the US-EPA, I assumed they were asking for the size of the containers for storage rather than total capacity for waste storage.

If you have any questions, please feel free to call me at 889-3695.

Yours very truly,

Arlene A. Hendrickson

Environmental Engineer

AAH/jls

bcc: M. E. Mullier

J. W. Boone

JNE/ROS/RCS/AB/RRW

E-6199

lease print or type in the unshaded fill—in areas are spaced for elite type	e, i.e., 12 characters/i		<u> </u>	Form Approved	OMB No. 158-\$80004
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I. FIRST OR REVISED APPL	ICATION >	the fact the state of the same	A Committee Control of the	<b>全种的种种种种</b>	and the second of the second o
Place an "X" in the appropriate box evised application. If this is your fi EPA I.D. Number in Item I above.	rst application and ye	ou already know your fac	cility's EPA I.D. Number, or i	pplication you are f this is a revised	e submitting for your facility or application, enter your facility
A. FIRST APPLICATION (place [X]). EXISTING FACILITY (				T 2 NEW EACT	LITY (Complete item below.)
IX 11. EXISTING FACILITY (	see instructions for a Complete item below	.) .)	water.	2.NEW FACI	FOR NEW FACILITI
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B. REVISED APPLICATION (1		nd complete Item I abov	e)		
1. FACILITY HAS INTER	IM STATUS			72	HAS A RCRA PERMIT
III. PROCESSES – CODES AN	D DESIGN CAPA	CITIES	The state of the s	Market Street	
PROCESS DESIGN CAPACITY     AMOUNT — Enter the amou     UNIT OF MEASURE — For     measure used. Only the unit:	nt. each amount entered	in column B(1), enter th	ne code from the list of unit m	neasure codes belo	ow that describes the unit of
PROCESS	PRO- APPROPRICESS MEASURE	IATE UNITS OF FOR PROCESS N CAPACITY	PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.) TANK	S02 GALLONS	OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	503 CUBIC YAF	ERS	SURFACE IMPOUNDMENT		GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT	S04 GALLONS	OR LITERS	INCINERATOR	Т03	TONS PER HOUR OR METRIC TONS PER HOUR;
Disposal: INJECTION WELL	. D79 GALLONS	OR LITERS			GALLONS PER HOUR OR LITERS PER HOUR
LANDFILL	D80 ACRE-FEE would cover depth of one	T (the volume that one acre to a e foot) OR	OTHER (Use for physical, c thermal or biological treatm processes not occurring in to	en <b>t</b> inks,	GALLONS PER DAY OR LITERS PER DAY
LAND APPLICATION OCEAN DISPOSAL		HECTARES PER DAY OR	surface impoundments or in ators. Describe the processe the space provided; Item III	s in	
SURFACE IMPOUNDMENT		OR LITERS			
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GALLONS	Y C- U	LITERS PER DAY TONS PER HOUR METRIC TONS PER HOU LITERS PER HOUR .	,	HECTARE-M ACRES HECTARES	AETER

other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

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III PROCESSES (continued)	•	· · · · · · · · · · · · · · · · · · ·	-	Sometime to the state of the st	낟

C. SPACE FOR ADDITIONAL PROCESS CODES ON FOR DESCRIBING OTHER PROCESSES (code INCLUDE DESIGN CAPACITY.

# IV. DESCRIPTION OF HAZARDOUS WASTES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B, ESTIMATED ANNUAL QUANTITY For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste/s/ that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE.
POUNDS,	Р	KILOGRAMS	. , , , , , , K
TONS	<b>. T</b>	METRIC TONS	М

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

### D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code/s/ from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility,

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes, If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.

  In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter
- 'included with above" and make no other entries on that line,
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

			EP/			C. UN	IT									D. PROCESSES
NON	W/	457	AR CO	10	B. ESTIMATED ANNUAL QUANTITY OF WASTE	OF ME SUR (ente	E				1, F		CES (en	55 CODE ter)	ES	2. PROCESS DESCRIPTION (if a code is not entered in $D(1)$ )
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<b>X</b> -2	D	0	0	2	400	P		Т	0	3	D	8	0			
<b>X</b> -3	D	0	0	1	100	P		Т	0	3	D	8	0	1 1	7 7	
X-4	D	0	0	2					Ι.	Γ.		1		7-1		included with above

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Con	GENERAL INFORMATION  Consolidated Permits Program  (Read the "General Instructions" before starting.)						0 9	D
SENERAL (Read the "G	enera	l Inst	ructions"		GENERAL INSTRU	1.0		
EPA I.D. NUMBER		//		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	a preprinted label has be n the designated space. F	leview	the i	nform-
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POLLUTANT CHARACTERISTICS			100		en avie	n.		
INSTRUCTIONS: Complete A through J to determine w questions, you must submit this form and the supplement if the supplemental form is attached. If you answer "no" is excluded from permit requirements; see Section C of the	al to	tw hi	iteu III uli Jetion v	nu need out submit any of these to	rms. You may answer "no	" if yo	our ac L	tivity
SPECIFIC QUESTIONS	YES	MAR	K'X' FORM ATTACHED	SPECIFIC QUE		A 155	макі	C'X' FORM ATTACHE
A. Is this facility a publicly owned treatment works				B. Does or will this facility leith	er existing or proposed)			
which results in a discharge to waters of the U.S.?		X		include a concentrated anim equatic enimal production fa	cility which results in a		X	
(FORM 2A)	16	17	18	discharge to waters of the U.S D. Is this a proposed facility (or		1.0	20 X	21
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in	1	X		in A or B above) which will	result in a discharge to	25	26	*** 27
A or B above? (FORM 2C)	22	<b>Z</b> 3	24	waters of the U,S.? (FORM 2 F. Do you or will you inject at	this facility industrial or	23	20	<u> </u>
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	municipal effluent below the taining, within one quarter	lowermost stratum con-		Х	
Ussaldons waries ( C. C.)	28	29	30	underground sources of drink	ing water? (FORM 4)	313	32	33
G: Do you or will you inject at this facility any produced water or other fluids which are brought to the surface		-		H. Do you or will you inject at	this facility fluids for spe		X	
in connection with conventional oil or natural gas pro-	1	X		cial processes such as minin process, solution mining of	minerals, in situ combus-		A	
duction, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid		^		tion of fossil fuel, or recove (FORM 4)	ry of geothermal energy?	37	30 /	39
hydrocarbons? (FORM 4)	34	36	76.	I is this facility a proposed s	tationary source which is	5	1	
one of the 28 industrial categories listed in the in- structions and which will potentially emit 100 tons	1			NOT one of the 28 industri instructions and which will	potentially emit 250 tons		X	
per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an		X	Į .	per year of any air pollutant Air Act and may affect or b	regulated under the Clean	*		
Clean Air Act and may affect of be located in an air attainment area? (FORM 5)		41	42	erea? (FORM 5)		. 43	. 44	.45
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VIII. OPERATOR INFORMAT	ION					
		A. NAME				B. Is the name listed in Item VIII-A also th
BASHLAND	CHEMICAL	COMPAN	Υ.			owner?
16 36						66
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XI. MAP						METALOGICA SPECIAL SPE
Attach to this application the outline of the facility,	the location of each o	of its existing and pro-	poosed intake a	and discharge s	tructures each of	ite hazardoue waeto
treatment, storage, or disp water bodies in the map ar	posal facilities, and eac	h well where it injec	ts fluids under	round. Includ	e all springs, river	s and other surface
XII. NATURE OF BUSINESS (	医中枢性动物 医神经性 医神经神经神经神经神经			ege (1985) – State Galler State St		Land Allegar
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XIII. CERTIFICATION (see ins	Specification of the specifica		Via.			
I certify under penalty of	law that I have person	ally examined and an	n familiar with	the information	n submitted in thi	s application and all
attachments and that, bas application, I believe that				idie for obtain re that there a	ing the informations are significant penales.	on contained in the alties for submitting
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A. NAME & OFFICIAL TITLE Michel E. Mullier	(type or print) James D. Idol,	Jr. B. STENATU	RE	. X.	c.	DATE SIGNED
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PA Form 3510-1 (6-80) RE	VERSE					

Continued from page 2.

NOTE: Photocopy this page before completing Form Approved OMB No. 158-S80004 we more than 26 wastes to list. FOR OFFICIAL USE EPA I.D. NUMBER (enter from page 1) 0 9 DUP DUP IV. DESCRIPTION OF HAZARDOUS WASTES (continued) C. UNIT OF MEA-SURE (enter code) A. EPA HAZARD. WASTE NO (enter code) D. PROCESSES B. ESTIMATED ANNUAL QUANTITY OF WASTE 1. PROCESS CODES (enter) 2. PROCESS DESCRIPTION (if a code is not entered in D(1)) 29 27 36 0 7 P D 0 600 S 0 1 0 0 D 6 Included with above. D 0 1 1 Included with above. 0 0 8 Included with above. 5  $F \mid 0$ 2 0 S 0 1 4 T 7 DIO 0 2 Т S 0 1 0 0 Included with above. 0 0 D 8 Included with above. 0 3 T F 0 22 S 0 2 F olo 5 Included with above. 11 0  $\mathbf{D}$ 0 T 1 22 S 0 1 D 0 0 ì 46 Т S 0 1 13 14 15 16 17 18 19 20 21 22 23 24 25 26

EPA Form 3510-3 (6-80)

IV. DESCRIPTION OF HAZARDOUS WASTF	tinued)			
E. USE THIS SPACE TO LIST ADDITIONA	ESS CODES FROM ITEM D(1) ON PAC			
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EPA I.D. NO. (enter from page 1)				
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F 0 H D 0 4 2 3 1 1 2 0 9 6		•		
V. FACILITY DRAWING	The second second			
All existing facilities must include in the space provided of	on page 5 a scale drawing of the facility <i>(see instruct</i> .	ons for more de	teil).	A
VI. PHOTOGRAPHS			<b>6</b> 2.	
All existing facilities must include photographs (at treatment and disposal areas; and sites of future st				cisting storage,
VII. FACILITY GEOGRAPHIC LOCATION	torage, treatment of disposal areas (see mistruo	tions for mor		N/
LATITUDE (degrees, minutes, & secon	uds) LONGIT	UDE (degrees, n	inutes, &	seconds)
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65 66 67 68 69 71	)	2 - 74 75 7	6 77 -	79
VIII. FACILITY OWNER				
A, If the facility owner is also the facility operator	as listed in Section VIII on Form 1, "General Inform	nation", place ar	"X" in th	ne box to the left and
skip to Section IX below.				_
B. If the facility owner is not the facility operator a	as listed in Section VIII on Form 1, complete the fo	llowing items:		
			I a aus	
	CILITY'S LEGAL OWNER	<u> </u>	2. PHO	NE NO. (area code & no.
			1 1 1	
	<u> </u>			<u> -                                    </u>
5 16	4. CITY OF TOWN	- 1		<del></del>
5 16 3. STREET OR P.O. BOX	4. CITY OR TOWN	- 1	56 - 58 ST	6. ZIP CODE
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3. STREET OR P.O. BOX  IX, OWNER CERTIFICATION  I certify under penalty of law that I have personal documents, and that based on my inquiry of those	If y examined and am familiar with the information individuals immediately responsible for obtaining the contract of the contr	ation submitte	ed in this	6. ZIP CODE  and all attached I believe that the
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Please print or type in the unshaded areas only Ashland Chemical Co. — I (fill-in areas are spaced for elite type, i.e., 12 ters/inch).	R & D - Dublin OH Approved OMB No. 158-S80004 705
HAZIOUS WASTE PERMIT APP	AGENCY LEPALD NUMBER
Consolidated Permits Program (This information is required under Section 30)	25 of RCRA.) F O H D O 4 2 3 1 1 2 0 9 1
FOR OFFICIAL USE ONLY APPLICATION DATE RECEIVED	
APPROVED (Vr. no. & day)	COMMENTS
73 24 - 29	
II. FIRST OR REVISED APPLICATION  Place an "X" in the appropriate box in A or B below (mark one box only) to indicate w	hether this is the first application you are submitting for your facility or a
revised application. If this is your first application and you already know your facility's EPA (.D. Number in Item I above.	EPA 1.D. Number, or if this is a revised application, enter your facility's
A. FIRST APPLICATION (place an "X" below and provide the appropriate date)  XXI. EXISTING FACILITY (See instructions for definition of "existing" facility.  Complete item below.)	2.NEW FACILITY (Complete item below.)  70 FOR NEW FACILITIES.
FOR EXISTING FACILITIES, PROVIDE THE DATE (  OPERATION BEGAN OR THE DATE CONSTRUCTIO  (use the boxes to the left)	Yr., mo., & day)  N COMMENCED  VB. MO. DAY (yr., mo., & day) OPERATION BEGAN OR IS  EXPECTED TO BEGIN
B. REVISED APPLICATION (place on "X" below and complete Hem I above)  1. FACILITY HAS INTERIM STATUS	2. FACILITY HAS A RCRA PERMIT
III. PROCESSES — CODES AND DESIGN CAPACITIES	72
A. PROCESS CODE — Enter the code from the list of process codes below that best de entering codes. If more lines are needed, enter the code(s) in the space provided. If	a process will be used that is not included in the list of codes below, then
describe the process (including its design capacity) in the space provided on the form  B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the cap	
1. AMOUNT — Enter the amount. 2. UNIT OF MEASURE — For each amount entered in column B(1), enter the cod	and the control of th
measure used. Only the units of measure that are listed below should be used.  PRO APPROPRIATE UNITS OF	PRO- APPROPRIATE UNITS OF
CESS MEASURE FOR PROCESS PROCESS CODE DESIGN CAPACITY	CESS MEASURE FOR PROCESS PROCESS CODE DESIGN CAPACITY
	ment: K TOI GALLONS PER DAY OR
TANK 502 GALLONS OR LITERS WASTE PILE 509 CUBIC YARDS OR SUR	FACE IMPOUNDMENT TO2 GALLONS PER DAY LITERS PER DAY LITERS PER DAY
	NERATOR TOS TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR
Disposal:  INJECTION WELL  D79 GALLONS OR LITERS  LANDFILL  D80 ACRE-FEET (the volume that  OTH	LITERS PER HOUR ER (Use for physical, chemical, TO4 GALLONS PER DAY OR
would cover one acre to a there depth of one foot) OR proc	nal or biological treatment LITERS PER DAY sesses not occurring in tanks, ce impoundments or inciner-
LAND APPLICATION D81 ACRES OR HECTARES does OCEAN DISPOSAL D82 GALLONS PER DAY OR the s	. Describe the processes in pace provided; Item III-C.)
SURFACE MPOUNDMENT D83 GALLONS OR LITERS  UNIT OF	UNIT OF UNIT OF
MEASURE CODE UNIT OF MEASURE	MEASURE MEASURE CODE UNIT OF MEASURE CODE
GALLONS G LITERS PER DAY	D HECTARE-METER
CUBIC YARDS Y METRIC TONS PER HOUR CUBIC METERS	E HECTARES
EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below, other can hold 400 gallons. The facility also has an incinerator that can burn up to 20	: A facility has two storage tanks, one tank can hold 200 gallons and the
S DUP 11 \	
LA PRO- B. PROCESS DESIGN CAPACITY	A. PRO- B. PROCESS DESIGN CAPACITY
CESS 2 UNIT OFFICIAL IN OFMEA OFFICIAL IN	CESS 2. UNIT OFFICIAL
USE (from list (specify) (enter code)	(from list above) Sure ONLY
X-1 S 0 2 600 G 5	S O 1 55 G 21 22 72 32 35 35 35 35 35 35 35 35 35 35 35 35 35
X-2 T 0 3 20 E 6	S 0 1 55 G
1 S 0 1 55 G 7	
2 S 0 1 55 G 8	
3 S 0 1 55 G 9	
4 S 0 2 8000 G G 10 10	[16 - 16 19 - 27 26 29 - 32

TIT	<b>PROCESSES</b>	(continued)
	INVUESSES	iconumueoi

C. SPACE FOR ADDITIONAL PROCESS CODES OR 1 2 d DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

### IV. DESCRIPTION OF HAZARDOUS WASTES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four—digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four—digit number/s/ from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste/s/ that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column 8 enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CO	DDE.	METRIC UNIT OF MEASURE CODE
POUNDS	P	KILOGRAMSK
TONS	T	METRIC TONS

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

### D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code/s/ from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code/s/ from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual
quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.

In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.

3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitiable and there will be in an incinerator and disposal will be in a landfill.

ы	A. EPA		C. UNIT					D. PROCESSES
Ζo	HAZARD. WASTENO (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	SURE (enter code)		1,	, PROCESS (ente		2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0	3	D 8 0		
<b>X</b> -2	$D \mid 0 \mid 0 \mid 2$	400	P	$T^{1}0$	3	D 8 0		
X-3	$D \mid 0 \mid 0 \mid 1$	100	P	T 0	3	D 8 0	<del>-1-1-</del>	
X-4	D 0 0 2	kaj lieto ilijani ilikus ja minesta ili 1900. Parada Nasanggara ilikus ili sasang mengang sasang						included with above

Continued from page 2, NOTE: Photocopy this page before completing Form Approved OMB No. 158-S80004 ave more than 26 wastes to list. FOR OFFICIAL USE CALY EPA I.D. NUMBER (enter from page 1) OHD 3 2 9 1 1 0 W DUP W DUP IV. DESCRIPTION OF HAZARDOUS WASTES (continued) C. UNIT OF MEA-SURE (enter code) D. PROCESSES A. EPA HAZARD. WASTE NO B. ESTIMATED ANNUAL QUANTITY OF WASTE 1. PROCESS CODES 2. PROCESS DESCRIPTION (if a code is not entered in D(1)) (enter code) 29 27 36 DO 0 7 P S 0 1 600 2 0 0 D 6 Included with above. 3 D 0 1 1 Included with above.  $D \mid 0 \mid 0$ 8 Included with above. 5 F 0 0 2  $\mathbf{T}$ S 0 1 4 6 D 0 0 7 2 Т S 0 1 7 D|0|0|4 Included with above. 8 D|0|0|8 Included with above. FIO 03 22 Т S 0 2 10 FO 5 0 Included with above. 11  $D \mid 0 \mid 0$ 1 22  $\mathbf{T}$ S 0 1 2 0 0 D 1 Т 46 S 0 1 13 14 15 16 17 18 19 20 21 22 23 24 25 26 **CONTINUE ON REVERSE** 

